

08-24-06

JFW RCE ✓

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL ADDRESS TO: MAIL STOP RCE Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450		Application Number: 09/287,573 Filing Date: April 6, 1999 First Named Inventor: David R. Walt Group Art Unit: 1641 Examiner Name: Gailene Gabel Attorney Docket No.: A-67207-2/DJB/RMS/DCF																																																	
This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-captioned application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application		"EXPRESS MAIL" MAILING LABEL NO. EV 424741833 US Date of Deposit: August 23, 2004																																																	
1. Submission required under 37 C.F.R. § 1.114																																																			
a. <input checked="" type="checkbox"/> Previously submitted i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on <u>July 21, 2004</u> (Any unentered amendment(s) referred to above will be entered.) ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ iii. <input type="checkbox"/> Other: _____ b. <input type="checkbox"/> Enclosed i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (including Form PTO-1449 and References) iv. <input checked="" type="checkbox"/> Other: Request for extension of time of one month.																																																			
2. Miscellaneous																																																			
a. <input type="checkbox"/> Suspension of action on the above-captioned application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed three months; Fee under 37 C.F.R. § 1.17(i) required.) b. <input type="checkbox"/> Other: _____																																																			
3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.																																																			
a. <input checked="" type="checkbox"/> The Fees are calculated as follows: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 10%; text-align: center;">AMOUNT</th> <th style="width: 10%;"></th> <th style="width: 10%; text-align: center;">Large Entity</th> <th style="width: 10%;"></th> <th style="width: 10%; text-align: center;">Small Entity</th> </tr> </thead> <tbody> <tr> <td>i. <input checked="" type="checkbox"/> RCE BASIC FEE</td> <td style="text-align: right;">\$ 385.00</td> <td></td> <td style="text-align: right;">\$ 770.00</td> <td></td> <td style="text-align: right;">\$ 385.00</td> </tr> <tr> <td>ii. <input checked="" type="checkbox"/> EXTENSION FEES</td> <td style="text-align: right;">\$ 55.00</td> <td>One-Month</td> <td style="text-align: right;">\$ 110.00</td> <td></td> <td style="text-align: right;">\$ 55.00</td> </tr> <tr> <td></td> <td></td> <td>Two-Month</td> <td style="text-align: right;">420.00</td> <td></td> <td style="text-align: right;">210.00</td> </tr> <tr> <td></td> <td></td> <td>Three-Month</td> <td style="text-align: right;">950.00</td> <td></td> <td style="text-align: right;">475.00</td> </tr> <tr> <td></td> <td></td> <td>Four-Month</td> <td style="text-align: right;">1485.00</td> <td></td> <td style="text-align: right;">740.00</td> </tr> <tr> <td></td> <td></td> <td>Five-Month</td> <td style="text-align: right;">2010.00</td> <td></td> <td style="text-align: right;">1005.00</td> </tr> <tr> <td>iii. <input type="checkbox"/> OTHER ()</td> <td style="text-align: right;">\$ 440.00</td> <td colspan="4"></td> </tr> </tbody> </table>					AMOUNT		Large Entity		Small Entity	i. <input checked="" type="checkbox"/> RCE BASIC FEE	\$ 385.00		\$ 770.00		\$ 385.00	ii. <input checked="" type="checkbox"/> EXTENSION FEES	\$ 55.00	One-Month	\$ 110.00		\$ 55.00			Two-Month	420.00		210.00			Three-Month	950.00		475.00			Four-Month	1485.00		740.00			Five-Month	2010.00		1005.00	iii. <input type="checkbox"/> OTHER ()	\$ 440.00				
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b. <input type="checkbox"/> Check in the amount of \$ _____ is enclosed. The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to Deposit Account No. 50-2319 . c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the fees as indicated above, charge any variance or credit any overpayments, to Deposit Account No. 50-2319 .																																																			
SUBMITTED BY:			Customer No. 32940																																																
Typed or Printed Name	David C. Foster		Registration No.																																																
Signature			Date																																																
			August 23, 2004																																																